



**Civil Aviation Authority - Sultanate of Oman
Flight Safety Department - Personnel Licensing Section**

**Assessment of Competence (AoC)
Air Traffic Controller
Assessor / Examiner**

<input type="checkbox"/> INITIAL	<input type="checkbox"/> REVALIDATION	<input type="checkbox"/> RENEWAL	<input type="checkbox"/> ADDITION
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A. ATCOs Details				
ATCO NAME				
ATC LICENCE NO.		ATC LICENCE VALIDITY		
MEDICAL CLASS		MEDICAL VALIDITY		
ELP LEVEL		VALIDITY		
CURRENT COC EXPIRY		<input type="checkbox"/> ADC	<input type="checkbox"/> APP	<input type="checkbox"/> APS
		<input type="checkbox"/> ACP	<input type="checkbox"/> ACS	

B. Assessment of Competence for ATC ASSESSOR / EXAMINER at:				
ATS UNIT / AIRPORT				
ATC RATING	<input type="checkbox"/> ADC	<input type="checkbox"/> APP	<input type="checkbox"/> APS	<input type="checkbox"/> ACP
	<input type="checkbox"/> ACS			
<input type="checkbox"/> INITIAL / <input type="checkbox"/> REFRESHER	TRAINING DATE			
CONTINUATION TRAINING DATE				
WRITTEN EXAMINATION	DATE:	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	
ASSESSOR COMPETENCE ASSESSMENT	DATE:	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	
OVERALL RESULT	<input type="checkbox"/> SUCCESSFUL		<input type="checkbox"/> UN SUCCESSFUL	
ASSESSOR ENDORSEMENT VALIDATED UPTO				

Note:

This assessment of competence shall be valid for a period of 3 years from the date of practical test

Reference: CAR.ATCO.C.045

C. Certification: The applicant meets all the requirements of CAR.ATCO.C.045		
ATC ASSESSOR/EXAMINER	UNIT MANAGER	APPLICANT
Name, Number & Signature	Name, Number & Signature	Name & Signature
Name	Name	Signature
Assessor number	Signature	
Signature	Stamp	
Stamp		